



# News Release

U.S. Department of Health & Human Services  
News Division

202-690-6343  
media@hhs.gov  
www.hhs.gov/news

## **FOR IMMEDIATE RELEASE**

Monday, December 3, 2012

### **People with Medicare save \$5 billion on prescription drugs because of health care law** *Additional value possible with plan options during Open Enrollment*

In the final week of Medicare Open Enrollment, Health and Human Services Secretary Kathleen Sebelius announced today that savings on prescription drugs made possible by the Affordable Care Act reached \$5.1 billion. In Arizona, people with Medicare have saved \$90.9 million because of the assistance the health care law provides with the Medicare prescription drug coverage gap known as the “donut hole.” In the first 10 months of 2012 alone, 50,204 individuals in Arizona have saved an average of \$671 on prescription drugs. During the same period, about 385,000 people with original Medicare in Arizona received one or more preventive services at no cost to them, with 59,707 having received an Annual Wellness Visit.

“The health care law is saving money for people with Medicare,” Secretary Sebelius said. “Everyone with Medicare should look at their health and drug plan options for additional value before the Medicare open enrollment period ends this week.”

For 2013 the health care law provides people with Medicare in the donut hole with greater savings, as discounts rise to 53 percent of the cost of brand name drugs and 21 percent of the cost of generic drugs. Savings on Medicare coverage of prescription drugs will gradually increase until 2020, when the donut hole will be closed.

Because of the health care law, people with Medicare can be healthier with free access (no deductible or co-pay) to many preventive services. Before 2011, people with Medicare had to pay part of the cost for many preventive services. Cost is no longer a barrier for seniors who want to stay healthy and treat problems early. In 2011, an estimated 32.5 million people with original Medicare or Medicare Advantage received one or more free preventive benefits.

### ***Open Enrollment Period Ends Dec. 7***

During Medicare’s annual open enrollment period, people with Medicare should compare costs, benefits and quality of Medicare health and drug plans to find the best value for 2013. People with Medicare should regularly examine their health care choices because individuals’ unique health needs as well as their health or prescription drug plan can change from year to year. Those who make their

coverage elections by Dec. 7, 2012, will ensure new coverage can begin without interruption on Jan. 1, 2013.

The Centers for Medicare & Medicaid Services (CMS) encourages people with Medicare to enroll in high quality plans and get the most value for their premiums. Medicare health and prescription drug plans with 5 star ratings may continuously market and enroll beneficiaries throughout 2013. Medicare beneficiaries in consistently low performing plans (those receiving less than 3 star ratings for at least the past three years) have been notified about their plan's poor performance and how they can switch to a higher quality plan.

Additionally, earlier this month, CMS announced that individuals with Medicare who are affected by Hurricane Sandy and unable to make a plan selection by Dec. 7, 2012, can still enroll in health and prescription drug coverage for 2013 by calling 1-800-MEDICARE anytime, 24 hours a day, seven days a week.

People who are satisfied that their current coverage under original Medicare or a Medicare health or drug plan meets their needs for next year, do not need to take any action to continue their current coverage.

### **Resources**

For state-by-state information on savings in the donut hole, please visit: <http://downloads.cms.gov/files/DonutHoleSavingsSummary-October2012.pdf>

Learn more about Medicare Drug Discounts: <http://www.healthcare.gov/law/features/65-older/drug-discounts/index.html>

For state-by-state information on utilization of free preventive services for people with original Medicare, please visit: <http://downloads.cms.gov/files/PreventiveServicesUtilizationbyState-October2012.pdf>

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For details about Medicare Plan Quality Ratings, please visit <http://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovGenIn/PerformanceData.html>.

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“The health care law is saving money for people with Medicare,” Secretary Sebelius said. “Everyone with Medicare should look at their health and drug plan options for additional value before the Medicare open enrollment period ends this week.”

For 2013 the health care law provides people with Medicare in the donut hole with greater savings, as discounts rise to 53 percent of the cost of brand name drugs and 21 percent of the cost of generic drugs. Savings on Medicare coverage of prescription drugs will gradually increase until 2020, when the donut hole will be closed.

Because of the health care law, people with Medicare can be healthier with free access (no deductible or co-pay) to many preventive services. Before 2011, people with Medicare had to pay part of the cost for many preventive services. Cost is no longer a barrier for seniors who want to stay healthy and treat problems early. In 2011, an estimated 32.5 million people with original Medicare or Medicare Advantage received one or more free preventive benefits.

### ***Open Enrollment Period Ends Dec. 7***

During Medicare’s annual open enrollment period, people with Medicare should compare costs, benefits and quality of Medicare health and drug plans to find the best value for 2013. People with Medicare should regularly examine their health care choices because individuals’ unique health needs as well as their health or prescription drug plan can change from year to year. Those who make their

coverage elections by Dec. 7, 2012, will ensure new coverage can begin without interruption on Jan. 1, 2013.

The Centers for Medicare & Medicaid Services (CMS) encourages people with Medicare to enroll in high quality plans and get the most value for their premiums. Medicare health and prescription drug plans with 5 star ratings may continuously market and enroll beneficiaries throughout 2013. Medicare beneficiaries in consistently low performing plans (those receiving less than 3 star ratings for at least the past three years) have been notified about their plan's poor performance and how they can switch to a higher quality plan.

Additionally, earlier this month, CMS announced that individuals with Medicare who are affected by Hurricane Sandy and unable to make a plan selection by Dec. 7, 2012, can still enroll in health and prescription drug coverage for 2013 by calling 1-800-MEDICARE anytime, 24 hours a day, seven days a week.

People who are satisfied that their current coverage under original Medicare or a Medicare health or drug plan meets their needs for next year, do not need to take any action to continue their current coverage.

### **Resources**

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“The health care law is saving money for people with Medicare,” Secretary Sebelius said. “Everyone with Medicare should look at their health and drug plan options for additional value before the Medicare open enrollment period ends this week.”

For 2013 the health care law provides people with Medicare in the donut hole with greater savings, as discounts rise to 53 percent of the cost of brand name drugs and 21 percent of the cost of generic drugs. Savings on Medicare coverage of prescription drugs will gradually increase until 2020, when the donut hole will be closed.

Because of the health care law, people with Medicare can be healthier with free access (no deductible or co-pay) to many preventive services. Before 2011, people with Medicare had to pay part of the cost for many preventive services. Cost is no longer a barrier for seniors who want to stay healthy and treat problems early. In 2011, an estimated 32.5 million people with original Medicare or Medicare Advantage received one or more free preventive benefits.

### ***Open Enrollment Period Ends Dec. 7***

During Medicare’s annual open enrollment period, people with Medicare should compare costs, benefits and quality of Medicare health and drug plans to find the best value for 2013. People with Medicare should regularly examine their health care choices because individuals’ unique health needs as well as their health or prescription drug plan can change from year to year. Those who make their

coverage elections by Dec. 7, 2012, will ensure new coverage can begin without interruption on Jan. 1, 2013.

The Centers for Medicare & Medicaid Services (CMS) encourages people with Medicare to enroll in high quality plans and get the most value for their premiums. Medicare health and prescription drug plans with 5 star ratings may continuously market and enroll beneficiaries throughout 2013. Medicare beneficiaries in consistently low performing plans (those receiving less than 3 star ratings for at least the past three years) have been notified about their plan's poor performance and how they can switch to a higher quality plan.

Additionally, earlier this month, CMS announced that individuals with Medicare who are affected by Hurricane Sandy and unable to make a plan selection by Dec. 7, 2012, can still enroll in health and prescription drug coverage for 2013 by calling 1-800-MEDICARE anytime, 24 hours a day, seven days a week.

People who are satisfied that their current coverage under original Medicare or a Medicare health or drug plan meets their needs for next year, do not need to take any action to continue their current coverage.

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“The health care law is saving money for people with Medicare,” Secretary Sebelius said. “Everyone with Medicare should look at their health and drug plan options for additional value before the Medicare open enrollment period ends this week.”

For 2013 the health care law provides people with Medicare in the donut hole with greater savings, as discounts rise to 53 percent of the cost of brand name drugs and 21 percent of the cost of generic drugs. Savings on Medicare coverage of prescription drugs will gradually increase until 2020, when the donut hole will be closed.

Because of the health care law, people with Medicare can be healthier with free access (no deductible or co-pay) to many preventive services. Before 2011, people with Medicare had to pay part of the cost for many preventive services. Cost is no longer a barrier for seniors who want to stay healthy and treat problems early. In 2011, an estimated 32.5 million people with original Medicare or Medicare Advantage received one or more free preventive benefits.

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